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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 09/532,034			ing Date 21/2000	To be Mailed
APPLICATION AS FILED - PART I (Column 1) (Column 2)									_			HER THAN ALL ENTITY
FOR NUMB				LED	NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A	N/A		N/A		N/A			N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A			N/A			N/A	
(37 CFR 1.16(o), (p), or (q))			N/A		N/A			N/A			N/A	
	TAL CLAIMS CFR 1.18(i))		mi	nus 20 =	•			x \$ =		OR	xs =	
	EPENDENT CLAIM CFR 1.18(h))	s	ព	inus 3 =	•			X \$ =			x s =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sis	neets of pap \$250 (\$125 dditional 50	er, the a for sma sheets o	d drawings exceed 100 application size fee due all entity) for each ar fraction thereof. See and 37 CFR 1.16(s).		0-11					
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST								SMA	LL ENTITY	OR		ER THAN ALL ENTITY
AMENDMENT	11/13/2006	REMAINING AFTER AMENDME		NUMBI PREVI PAID F	ER Dusly	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(1))	• 28	Minus	<b>~</b> 32		= 0		x \$ =		OR	X \$50=	0
	Independent (37 CFR 1.18(h))	• 9	Minus	<b>9</b>		= 0		X\$ =		OR	X \$200=	0
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR	\$ 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
2 04 06								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
3.20.77 (Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAININ AFTER AMENDMEI	- 1	NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	·28	Minus	-3	2	=		X\$ =		OR	x s =	
	independent (37 CFR t 1f(h))	· Q	Minus	414	9	=		x \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" catherine d. smith  "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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